

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>MB</i>	75381	
O.I.P.E. CLASSIFIER		<i>2/2</i>	<i>8/23/50</i>
FORMALITY REVIEW	<i>MB</i>	<i>863</i>	<i>9-26-50</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

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Claim	Final	Original	Date
1	✓	✓	10/2/50
2	✓	✓	10/3/50
3	✓	✓	10/4/50
4	✓	✓	10/5/50
5	✓	✓	10/6/50
6	✓	✓	10/7/50
7	✓	✓	10/8/50
8	✓	✓	10/9/50
9	✓	✓	10/10/50
10	✓	✓	10/11/50
11	✓	✓	10/12/50
12	✓	✓	10/13/50
13	✓	✓	10/14/50
14	✓	✓	10/15/50
15	✓	✓	10/16/50
16	✓	✓	10/17/50
17	✓	✓	10/18/50
18	✓	✓	10/19/50
19	✓	✓	10/20/50
20	✓	✓	10/21/50
21	✓	✓	10/22/50
22	✓	✓	10/23/50
23	✓	✓	10/24/50
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25	✓	✓	10/26/50
26	✓	✓	10/27/50
27	✓	✓	10/28/50
28	✓	✓	10/29/50
29	✓	✓	10/30/50
30	✓	✓	10/31/50
31	✓	✓	10/32/50
32	✓	✓	10/33/50
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34	✓	✓	10/35/50
35	✓	✓	10/36/50
36	✓	✓	10/37/50
37	✓	✓	10/38/50
38	✓	✓	10/39/50
39	✓	✓	10/40/50
40	✓	✓	10/41/50
41	✓	✓	10/42/50
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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